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UTILITY PATENT APPLICATION TRANSMITTAL		Attorney Docket No.	500.42967X00
		First Inventor	SANO, SEIICHI
		Title	DIGITAL DATA RECEIVING APPARATUS AND METHOD WITH SYSTEM CHANGEOVER FUNCTION
(Only for new nonprovisional applications under 37 CFR 1.53(b))		Express Mail Label No.	

SPT
10/62/56
17410/62/56
07/23/03

APPLICATION ELEMENTS		Assistant Commissioner for Patents ADDRESS TO: Box Patent Application Washington, DC 20231
SEE MPEP chapter 600 concerning utility patent application contents.		

1. Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
2. Applicant claims small entity status.
See 37 CFR 1.27.
3. Specification [Total Pages: 20]
(Preferred arrangement set forth below)
-Descriptive title of the invention
-Cross Reference to Related Applications
-Statement Regarding Fed sponsored R & D
-Reference to sequence listing, a table, or a computer program listing appendix
-Background of the Invention
-Brief Summary of the Invention
-Brief Description of the Drawings (if filed)
-Detailed Description
-Claim(s)
-Abstract of the Disclosure
4. Drawing(s) (35 U.S.C. 113) [Total Pages: 5]
5. Oath or Declaration [Total Pages: 3]
a. Newly executed (original or copy)
b. Copy from a prior application (37 CFR 1.63 (d))
(for continuation/divisional with Box 18 completed)
i. **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s)
Named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b)
6. Application Data Sheet. See 37 CFR 1.76
7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)
a. Computer Readable Form (CRF)
b. Specification Sequence Listing on:
i. CD-ROM or CD-R (2 copies); or
ii. paper
c. Statements verifying identity of above copies

- | | |
|---|--|
| ACCOMPANYING APPLICATION PARTS | |
| 9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & documents(s)) | |
| 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement | <input checked="" type="checkbox"/> Power of Attorney
(when there is an assignee) |
| 11. <input type="checkbox"/> English Translation Document (if applicable) | |
| 12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 | <input type="checkbox"/> Copies of IDS Citations |
| 13. <input type="checkbox"/> Preliminary Amendment | |
| 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)
(Should be specifically itemized) | |
| 15. <input checked="" type="checkbox"/> Certified Copy of Priority Document(s)
(if foreign priority is claimed) | |
| 16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122
(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. | |
| 17. <input checked="" type="checkbox"/> Other: <u>Figs. 1-4, Credit Card Payment Form, Information Disclosure Sheet Under 37 CFR 1.56 w/refs.</u> | |

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

Continuation Divisional Continuation-in-part (CIP) of prior application No.:

Prior application information: Examiner: _____ Group Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number or Bar Code Label	020457		or <input type="checkbox"/> Correspondence address below (Insert Customer No. or Attach bar code label here)	
Name	ANTONELLI, TERRY, STOUT & KRAUS, LLP			
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City		State		Zip Code
Country		Telephone	(703) 312-6600	Fax (703) 312-6666
Name	Melvin Kraus		Registration No. (Attorney/Agent)	22,466
Signature	<u>Melvin Kraus</u>		Date	July 23, 2003

Burden Hour Statement: This form is estimated to take .2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231

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FEE TRANSMITTAL

for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

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<input type="checkbox"/> Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/> Deposit Account: Deposit Account Number 01-2135 Deposit Account Name Antonelli, Terry, Stout & Kraus, LLP The Commissioner authorized to: (check all that apply) <input type="checkbox"/> Charge fees indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fees indicated below, except for the filing fee to the above-identified deposit account.																																																																																																																																																									
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ADDITIONAL FEES <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 15%;">Fee Code</th> <th style="text-align: left; width: 15%;">Large Entity Fee (\$)</th> <th style="text-align: left; width: 15%;">Small Entity Fee (\$)</th> <th style="text-align: left; width: 50%;">Fee Description</th> <th style="text-align: left; width: 15%;">Fee Paid</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>65 Surcharge – late filing fee or oath</td><td></td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25 Surcharge – late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>1053</td><td>130</td><td>1053</td><td>130 Non-English specification</td><td></td></tr> <tr><td>1812</td><td>2,520</td><td>1812</td><td>2,520 For filing a request for <i>ex parte</i> reexamination</td><td></td></tr> <tr><td>1804</td><td>920*</td><td>1804</td><td>920* Requesting publication of SIR prior to Examination 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SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	<i>Melvin Kraus</i>	Registration No. (Attorney/Agent)	22,466
Signature	<i>M. Kraus</i>	Telephone	703-312-6600
		Date	July 23, 2003

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This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.